| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 |  |   |  |                                |                     |                                  |                       |  | Application or Docket Number $10/5940/8$ |                     |                        |  |
|--|--|---|--|--------------------------------|---------------------|----------------------------------|-----------------------|--|--|---------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                         |  |   |  |                                |                     |                                  | SMALL EN              |  |  |                     | THAN<br>ENTITY         |  |
| U.S. NATIONAL STAGE FEES   |  |   |  |                                |                     |                                  | RATE                  | FEE  | 7  | RATE                | FEE                    |  |
| BASIC FEE  |  |   |  | ***********                    |                     |                                  | BASIC FEE             |  | OR                                       | BASIC FEE           | 3/10                   |  |
| EXAMINATION FEE  |  |   |  |                                |                     |                                  | EXAM. FEE             |  | 1  | EXAM. FEE           | 200                    |  |
| SEARCH FEE   |  |   | 1                                      |                                |                     |                                  | SEARCH FEE            |  | 1  | SEARCH FEE          | 400                    |  |
| FEE FOR EXTRA SPEC. PGS.   |  |   | minus 100 =                            |                                |                     | / 50 =                           | X \$ 125 =            |  | 1  | X \$ 250 =          | 1,00                   |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | 9                                      | minus 20 =                     | *                   |                                  | X \$ 25 =             | <del>                                     </del> | OR                                       |                     |                        |  |
| INDEPENDENT CLAIMS   |  |   | 1                                      | minus 3 =                      | *                   |                                  | X \$ 100 =            |  | OR                                       |                     |                        |  |
| MUL  | TIPLE DEPEN                                    | DENT CLAIM PR   | RESENT                                 |                                |                     |                                  | + \$ 180 =            | <del> </del>                                     | OR                                       | <u> </u>            |                        |  |
| * If   | the difference                                 | in column 1 is  | less than zero, enter "0" in colu      |                                |                     | olumn 2                          | TOTAL                 |  | OR                                       | TOTAL               | 900                    |  |
| AMENDMENT A  |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT   | - 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | HIGH<br>NUM<br>PREVIO          | EST<br>BER<br>OUSLY | PRESENT EXTRA                    | SMALL<br>RATE         | ADDI-<br>TIONAL<br>FEE                           | OR                                       | SMALL E             |                        |  |
|  | Total  | *   | Minus                                  | **                             | ruk                 | =                                | X \$ 25 =             | 1  | OR                                       | X \$ 50 =           | FEE                    |  |
|  | Independent                                    | *   | Minus                                  | ***                            | ·                   | =                                | X \$ 100 =            | <del> </del>                                     | OR                                       | X \$ 200 =          |                        |  |
|  | FIRST PRES                                     | ENTATION OF N   | MULTIPLE DI                            | EPENDENT (                     | CLAIM               |                                  | + \$ 180 =            |  | OR                                       | + \$ 360 =          |                        |  |
|  |  | (Column 1)  |  | (Colur                         | nn 2)               | (Column 3)                       | TOTAL ADDIT           |  | OR                                       | TOTAL ADDIT.<br>FFF |                        |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |  | HIGH<br>NUM<br>PREVIO<br>PAID  | EST<br>BER<br>OUSLY | PRESENT<br>EXTRA                 | RATE                  | ADDI-<br>TIONAL<br>FEE                           |  | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus                                  | **                             |                     | =                                | X \$ 25 =             |  | OR                                       | X \$ 50 =           |                        |  |
|  | Independent                                    | *   | Minus                                  | ***                            |                     | =                                | X \$ 100 =            |  | OR                                       | X \$ 200 =          | -                      |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                                |                     |                                  | + \$ 180 =            |  | OR                                       | + \$ 360 =          |                        |  |
|  |  |   |  |                                |                     |                                  | TOTAL ADDIT           |  | OR                                       | TOTAL ADDIT.        |                        |  |
| **   | If the "Highest Nu<br>If the "Highest Nu       | umn 1 is less than th<br>umber Previously Pa<br>umber Previously Pai<br>nber Previously Pai | iid For' IN THIS<br>iid For' IN THIS   | SPACE is less<br>SPACE is less | than '2<br>than '3  | 0', enter "20".<br>', enter "3". | in the appropriate be | ox in column                                     | 1.                                       |                     |                        |  |